



STATE PRESCRIBED FORM PA-003

SUBMIT THIS FORM TO YOUR LOCAL ASSESSOR

For the Wisconsin Municipal Assessor's list, visit: <http://www.dor.state.wi.us/training/assrlist.pdf>

**** AVOIDING DOUBLE ASSESSMENTS ****

Businesses classified as Manufacturers under §70.995: Personal Property classified as Manufacturing and assessed by the Department of Revenue should be submitted to the department annually by March 1 on form PA-750 P which can be found on the DOR website at: <http://www.dor.state.wi.us/forms/manuf/index.html#manuf> as a paper form as well as an E-Filing option. **To avoid being assessed by both the DOR and your local assessor, do not also file Personal Property classified as Manufacturing on form PA-003.**

Telco Companies: Personal Property submitted to the Department of Revenue annually by March 1 under §76.83 as Telco Personal Property should be filed on form PA-751 T-P, which can be found on the DOR website at: <http://www.dor.state.wi.us/forms/manuf/index.html#telco> . **To avoid double assessments, Telco Personal Property should not be additionally submitted to the local assessor on form PA-003.**

DUE DATE
March 1, 2006

STATEMENT OF PERSONAL PROPERTY
Subject to Assessment January 1, 2006

2006

Who Must File? Every person, firm, or corporation as defined in Section 70.35 Wis. Statutes receiving from the assessor a return of personal property, must submit the return to the assessor on or before March 1. This return is confidential and is not available for public inspection.

Failure to File: If you fail to file, the assessor must estimate the value of your property using the best information available. In addition, you shall be denied any right of abatement by the board of review, under Section 70.35(4), Wis. Statutes.

Property Owner: (or in charge as agent, consignee, or other representative capacity)



**FOR ASSISTANCE IN COMPLETING THIS FORM,
YOU MAY CONTACT THE ASSESSOR.**

☐ Town
☐ Village of }
☐ City }
County of _____

Account Number _____

Property Address _____

Engaged in Business of _____

☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ LLC ☐ LLP

New Owner Name _____
Situs Address _____
Mailing Address _____
City, State, Zip _____
Phone No. () _____

Type of Change ☐ Discontinued ☐ Sold
☐ Incorporated ☐ Moved

Date of Change _____

Schedule A
SUMMARY OF PERSONAL PROPERTY AS OF JANUARY 1, 2006

Schedule A is the summary of all taxable personal property from Schedules B through H. The total of column 3 is your declaration of personal property subject to tax within this municipality. **Do not write "SALY" for Same As Last Year;** forms must be filled out completely. Note that Schedule D-1, exempt computer equipment and software, cash registers and single-function fax machines, is excluded from TOTAL ASSESSABLE.

| Column 1 Property Description | Column 2 Subtotals | Values ↓ Column 3 Totals | C O D E | Column 4 LEAVE BLANK |
|--|-----------------------|-----------------------------------|------------------|-------------------------|
| 1. Boats & Other Watercraft (from Schedule B) | | | 1 | |
| 2. Machinery, Tools & Patterns (from Schedule C) | | | 2 | |
| 3. Furniture, Fixtures & Office Equipment (from Schedule D) | | | | |
| 5. Multifunction Fax Machines, Copiers & Phone Systems (from Schedule D-2) | | | | |
| 6. TOTAL OF LINES 3 and 5 | | | 3 | |
| 7. Leased Equipment (Property in charge of but not owned from Sch. F) | | | | |
| 8. Supplies (from Schedule G) | | | | |
| 9. All Other Personal Property (from Schedule H) | | | | |
| 10. TOTAL OF LINES 7, 8, AND 9 | | | 4A | |
| 11. Building on Leased Land (from Schedule E) | | | 4B | |
| TOTAL ASSESSABLE (TOTAL OF LINES 1, 2, 6, 10 AND 11) | | | | |

| | | | | |
|---|--|--|--|--|
| 4. EXEMPT Computer Equipment & Software . . . (from Schedule D-1) | | | | |
| Please report the total from Schedule D-1 from the 2005 PA-003 | | | | |

I hereby declare all information given is true and correct for all the personal property for which I am subject to assessment and which was owned by me or held in my possession on January 1, 2006.

| | | | |
|-----------------------------|------------------|--------------------------------|------------------|
| Owner's Name (please print) | Signature & Date | Preparer's Name (please print) | Signature & Date |
| Owner's Full Address | | Preparer's Full Address | |
| Owner's Phone Number () | Fax Number | Preparer's Phone Number () | Fax Number |
| E-mail | | E-mail | |

Schedule B
BOATS AND WATERCRAFT

Schedule B is for reporting boats and watercraft not exempt. *Composite Conversion Factors* and a table of *Composite Useful Lives* on various equipment can be found at <http://www.dor.state.wi.us/report/p.html#prop>.

| <i>Column 1</i> Property Description | <i>Column 2</i> Year Acquired | <i>Column 3</i> Cost When Acquired | <i>Column 4</i> Conversion Factor | <i>Column 5</i> Declared Value January 1 | <i>Column 6</i> LEAVE BLANK |
|--|---|--|---|--|---------------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| Total Declared Value | | | | | |

Use additional sheets if necessary.

**Enter Col. 5 Total on
Sch. A, Line 1, Col. 3**

Schedule C
MACHINERY, TOOLS AND PATTERNS

Report all machinery and shop equipment. Take the costs shown from your accounting records. Any variation from information contained in your income tax return must be explained by letter or schedule. Summarize the original asset costs by acquisition year as of January 1 of last year. Enter these costs in column 2. Enter any additions or deletions by acquisition year in column 3.

| <i>Column 1</i> Year Assets Acquired | <i>Column 2</i> Total Original Installed Cost as of January 1, 2005 | <i>Column 3</i> Additions, Disposals, and Transfers at Cost Since Jan. 1, 2005 | <i>Column 4</i> Net Total Original Installed Cost as of Jan. 1, 2006 <small>(column 2 +/- column 3)</small> | <i>Column 5</i> Conversion Factor 10 yr. | <i>Column 6</i> Indexed Net Value (Full Value) on January 1, 2006 <small>(Column 4 x Column 5)</small> | <i>Column 7</i> LEAVE BLANK |
|--|---|--|--|--|---|---------------------------------------|
| 2005 | | | | .925 | | |
| 2004 | | | | .794 | | |
| 2003 | | | | .675 | | |
| 2002 | | | | .574 | | |
| 2001 | | | | .488 | | |
| 2000 | | | | .414 | | |
| 1999 | | | | .352 | | |
| 1998 | | | | .300 | | |
| 1997 | | | | .255 | | |
| 1996 | | | | .216 | | |
| Prior to '96 | | | | .128 | | |
| Totals | | | | | | |

**Enter Col. 6 Total on
Sch. A, Line 2, Col. 3**

Schedule D
FURNITURE, FIXTURES AND OFFICE EQUIPMENT

Report such assets as office, store and professional furniture, fixtures and equipment, business and professional libraries, and other assets related to the sales and administration of your business. Original Cost per column 4, Schedule D should contain all costs of installation and freight, add-ons, and sales tax.

| <i>Column 1</i> Year Assets Acquired | <i>Column 2</i> Total Original Installed Cost as of January 1, 2005 | <i>Column 3</i> Additions, Disposals, and Transfers at Cost Since Jan. 1, 2005 | <i>Column 4</i> Net Total Original Installed Cost as of Jan. 1, 2006 <small>(Column 2 +/- Column 3)</small> | <i>Column 5</i> Conversion Factor 10 yr. | <i>Column 6</i> Indexed Net Value (Full Value) on January 1, 2006 <small>(Column 4 x Column 5)</small> | <i>Column 7</i> LEAVE BLANK |
|--|---|--|--|--|---|---------------------------------------|
| 2005 | | | | .925 | | |
| 2004 | | | | .794 | | |
| 2003 | | | | .675 | | |
| 2002 | | | | .574 | | |
| 2001 | | | | .488 | | |
| 2000 | | | | .414 | | |
| 1999 | | | | .352 | | |
| 1998 | | | | .300 | | |
| 1997 | | | | .255 | | |
| 1996 | | | | .216 | | |
| Prior to '96 | | | | .128 | | |
| Totals | | | | | | |

**Enter Col. 6 Total on
Sch. A, Line 3, Col. 2**

Schedule D-1

**EXEMPT COMPUTER EQUIPMENT AND SOFTWARE (OWNED),
CASH REGISTERS & SINGLE FUNCTION FAX MACHINES**

Report mainframe computers, minicomputers, personal computers, networked personal computers, servers, terminals, monitors, disk drives, electronic peripheral equipment, tape drives, printers, basic operational programs, systems software, prewritten software, ATMs, cash registers, and single function fax machines.

| <i>Column 1</i> Year Assets Acquired | <i>Column 2</i> Total Original Installed Cost as of January 1, 2005 | <i>Column 3</i> Additions, Disposals, and Transfers at Cost Since Jan. 1, 2005 | <i>Column 4</i> Net Total Original Installed Cost as of Jan. 1, 2006 <small>(column 2 +/- column 3)</small> | <i>Column 5</i> Conversion Factors 4 yr. | <i>Column 6</i> Indexed Net Value (Full Value) on January 1, 2006 <small>(Column 4 x Column 5)</small> | <i>Column 7</i> LEAVE BLANK |
|--|---|--|--|--|---|---------------------------------------|
| 2005 | | | | .813 | | |
| 2004 | | | | .513 | | |
| 2003 | | | | .320 | | |
| 2002 | | | | .200 | | |
| 2001 | | | | .125 | | |
| 2000 | | | | .078 | | |
| 1999 | | | | .048 | | |
| Prior to '99 | | | | .030 | | |
| Totals | | | | | | |

Total leased equipment from Schedule F, Column 7

Combined
Totals

NOTE: Per Section 70.36(1m) Any person, firm or corporation that fails to include information on property that is exempt under s. 70.11(39) and (39m) on the report under s. 70.35 shall forfeit \$10 for every \$100 or major fraction thereof that is not reported.

**Enter Col. 6 Total on
Sch. A, Line 4, Col. 2**

Schedule D-2

MULTIFUNCTION FAXES, COPIERS AND TELEPHONE SYSTEMS, AND COMPUTERIZED EQUIPMENT

Report all multifunction fax machines, copiers, telephone systems (PBXs), and equipment with embedded computerized components.

| <i>Column 1</i> Year Assets Acquired | <i>Column 2</i> Total Original Installed Cost as of January 1, 2005 | <i>Column 3</i> Additions, Disposals, and Transfers at Cost Since Jan. 1, 2005 | <i>Column 4</i> Net Total Original Installed Cost as of Jan. 1, 2006 <small>(column 2 +/- column 3)</small> | <i>Column 5</i> Conversion Factors 6 yr. | <i>Column 6</i> Indexed Net Value (Full Value) on January 1, 2006 <small>(Column 4 x Column 5)</small> | <i>Column 7</i> LEAVE BLANK |
|--|---|--|--|--|---|---------------------------------------|
| 2005 | | | | .875 | | |
| 2004 | | | | .663 | | |
| 2003 | | | | .497 | | |
| 2002 | | | | .373 | | |
| 2001 | | | | .280 | | |
| 2000 | | | | .210 | | |
| Prior to '00 | | | | .111 | | |
| Totals | | | | | | |

**Enter Col. 6 Total on
Sch. A, Line 5, Col. 2**

Schedule E

BUILDINGS ON LEASED LAND

Report buildings, structures, and other improvements which you own, but which are located on land that you do not own. They will be valued in the same manner as improvements located on land that is owned by you. Enter your opinion of value in column 4.

| <i>Column 1</i> Property Description | <i>Column 2</i> Year Acquired | <i>Column 3</i> Cost When Acquired | <i>Column 4</i> Declared Value January 1 | <i>Column 5</i> LEAVE BLANK |
|--|---|--|--|---------------------------------------|
| | | | | |
| | | | | |
| Total Declared Value | | | | |

**Enter Col. 4 Total on
Sch. A, Line 11, Col. 3**

Schedule F
LEASED EQUIPMENT (Property in Charge of But Not Owned)

Report all leased equipment such as business furniture, fixtures, equipment, machines, postage meters, tools, or advertising devices and similar items loaned, leased, stored or otherwise held and not owned by you. These items may or may not be assessed to you. Frequently, leases state whether the owner or the lessee is responsible for the personal property taxes. *Composite Conversion Factors* and a table of *Composite Useful Lives* on various equipment can be found at <http://www.dor.state.wi.us/report/p.html#prop>. Factors for computer equipment can be found on Schedule D-1.

| Column 1 Name and Address of Leasing Company* | Column 2 Type of Equipment and Lease No. | Column 3 Gross Annual Rent | Column 4 Year Installed | Column 5 Original Cost | Column 6 Indexed Value Taxable Equipment | Column 7 Indexed Value Computer | Column 8 LEAVE BLANK |
|---|---|-------------------------------------|-------------------------------|------------------------------|---|--|----------------------------|
| ----- | | | | | | | |
| ----- | | | | | | | |
| ----- | | | | | | | |
| ----- | | | | | | | |
| ----- | | | | | | | |
| ----- | | | | | | | |

* Leasing Companies: To avoid duplication of assessment, provide the same information requested on this schedule including name and location of lessees.

Totals

Enter Col. 6
Total on Sch. A,
Line 7, Col. 2

Enter Col. 7 Total on
Sch. D-1 on page 3,
near bottom of Col. 6

Schedule G
SUPPLIES

Report your supplies inventory. Supplies include items which are expensed, not subject to resale, but are necessary in the conduct of business, are consumed in the operations of providing customer services. Supplies are items such as those used for selling and advertising, office, shipping, medical, dental, janitorial and cleaning, in your possession on January 1.

| | |
|--|----|
| January 1, 2006 Supplies Inventory | \$ |
|--|----|

Enter amount on Sch. A, Line 8, Col. 2

Schedule H
ALL OTHER PERSONAL PROPERTY, LEASEHOLD IMPROVEMENTS, SIGNS, BILLBOARDS, VIDEO TAPES, LOGS & FOREST PRODUCTS, OTHER IMPROVEMENTS ON LEASED LAND (EXEMPT), FOREST CROP LAND, OR MANAGED FOREST LAND

Report all leasehold improvements and other personal property not reported on a separate schedule. Leasehold improvements are any alterations, additions, or improvements, adding value, made by a tenant to leased or rented premises. Enter the total improvement cost in column 3. This schedule also includes logs and other forest products belonging to persons whose principal activity is not related to the buying, selling or manufacturing use of such property. Merchant's or manufacturing stock are exempt. Report improvements on leased land (exempt) and privately owned structures, billboards, or special taxed land. *Composite Conversion Factors* and a table of *Composite Useful Lives* on various equipment can be found at <http://www.dor.state.wi.us/report/p.html#prop>.

| Column 1 Year Acquired | Column 2 Property Description | Column 3 Cost When Acquired | Column 4 Conversion Factor | Column 5 Declared Value January 1 | Column 6 LEAVE BLANK |
|------------------------------|----------------------------------|-----------------------------------|----------------------------------|---|----------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| Total | | | | | |

Use additional sheets if necessary.

Enter Col. 4 Total on
Sch. A, Line 9, Col. 2

Please provide the following lease provisions:

- 1) Term: From (MM/YR)_____ To (MM/YR)_____
- 2) Square foot of leased area _____ S.F.
- 3) Annual Rental \$_____ Percentage Rental _____%
- 4) Rent includes (check any that apply): ☐ Electric ☐ Heat ☐ Real Estate Taxes ☐ Parking ☐ Common Area Maintenance
☐ Other (describe)_____